(i) Disease Management including early case detection and complete treatment

(ii) Integrated Vector Management — For transmission Risk Reduction and

(iii) Supportive Interventions including. Behavior Change Communication.

Long waiting of outdoor patients for consultation in AliMS

†349. SHRI SAMAN PATHAK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are'aware of the fact that patients have to wait for long hours in line to get themselves registered as outdoor patients department of Ali India Institute of Medical Sciences;

(b) whether Government have any scheme for providing facilities io patients for their easy registration; and

(c) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMl): (a) to (c) According to AIIMS the average number of patients attending OPD is app-ox. 7000 patients per day. who start queuing right from early morning so as to get early consultation. The hospital is also contemplating computerization of OPD **registration** to minimize the problem. ^

Facilities available in Hospitals and PHCs to face Dengue and Chikungunya

350 SHRI M.V MYSURA REDDY:
SHRIMATI S.G INDIRA:
SHRI C PERUMAL:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of cases detected pertaining to dengue and chikungunya diseases from the various Government hospitals and primary health centres in the country, State-wise;

† Original notice of the question was received-in Hindi

(by whether it is a fact that all the Government hospitals and primary health centres functioning in the different parts of the country are not well-equipped tc control these diseases;

(c) if so, the specific reasons therefore;

(d) the total number of patients died so far from the above diseases in the various States of the country, State-wise; and

(e) the necessary steps being taken by Government to prevent the aforesaid diseases in the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The state-wise distribution of number of cases of Dengue and Chikungunya up to 20th November, 2006 reported from various hospitals and primary health centres in the country is enclosed at Statement-I (See below)

(b) and (c) No, Sir.

(d) The State-wise distribution of the number of patients died in the country due to Dengue up to 20th November 2006 is enclosed as Statement-!!. No deaths directly attributable to Chikungunya have been reported so far in the country.

(e) The various remedial actions taken by Government of India as below.

- The Government of India is continually monitoring the Chikungunya and Dengue situation right from the first reporting in states.
- Detailed guidelines and advisories for prevention and control of these diseases have been sent to all affected states.
- Intensive Behaviour Change Communication activities through print, electronic media, interpersonal communication, outdoor publicity as well as inter-sectoral.collaboration with civil society organizations (NGOs/CBOs/FBOs Self help Group, PRIs were emphasized.

© Government of India has supplied larvicides, adulticides to affected states for control of Dengue and Chikungunya

Government of India as identified Apex Referral institutions and sentinel surveillance centres for diagnosis and regular surveillance of Dengue and Chikungunya fever esses.

Statement-I

State-wise Dengue Cases & Deaths as on 20.11.2006

Sl. No.	State	2003		2004		2005		2006 (upto 20 Nov.)	
		C	D	C	D	C	D	C	D
1.	Andhra Pradesh	95	5	230	1	99	2	149	16
2.	Chandigarh	0	0	0	0	2	0	108	0
3.	Delhi	2882	35	605	3	1023	9	3236	64*
4.	Goa	12	2	3	0	1	0	0	0
5.	Gujarat	249	9	117	4	454	11	493	3
6.	Haryana	95	4	25	0	183	1	430	2
7.	J&K	0	0	0	0	0	0	24	0
8.	Karnataka	1226	7	291	2	587	17	98	7
9.	Kerala	3546	68	686	8	1028	8	880	5
10.	Maharashtra	772	45	856	22	349	56	593	20
11.	Sikkim	0	0	12	0	0	0	0	0
12.	Punjab	848	13	52	0	251	2	931	5
13.	Rajasthan	685	11	207	5	370	5	1224	17
14.	Tamil Nadu	1600	8	1027	0	1142	8	328	2
15.	Pondicherry	, 6	0	0	0	0	0	0	0
16.	Uttar Pradesh	738	8	8	0	121	4	630	14
17.	D&NHaveli	0	0	1	0	0	0	0	0
18.	West Bengal	0	0	32	0	6375	34	963	7
19.	Madhya Pradesh	0	0	0	0	0	0	7	0
	TOTAL	12754	215	4153	45	11985	157	10094	162

C=Cases, D=Deaths

38 Deaths from Dengue confirmed in Delhi & NCR and 26 suspected deaths from Dengue reported (8 from Delhi and 18 from other states) — Confirmation report still awaited

(*13 suspected deaths have not been confirmed by the MCD Board, thereby, deleted.)

Statement-ll

State-wise Chikungunya Cases & Deaths as on 20.11.2006

State	No.of Districts Affected	Total fever cases suspected Chikungunya fever cases	No.of Samples sent to NIV/NICD	No.of confirmed cases	No. of deaths
Andhra Pradesh	23	77535	1224	248	0
Karnataka	27	761927	4994	298	0
Maharashtra	31	263268	5040	719	0
Tamil Nadu	35	64288	648	116	0
Madhya Pradesh	21	59981	892	70	0
Gujarat	25	74540	1082	185	0
Kerala	14	68301	235	.38	0
A&N Island	2	4469	0	0	0
GNCT of Delhi	12	500	500	52	0
Rajasthan	1	102	44	24	0
Pondicherry	1	542	52	9	0
Goa		2	287	75	2
TOTAL	194	1375740	14786	1761	0

Primary Heaith Centres at Buxar District

†351. SHRI BASHISTHA NARAIN SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the specific guidelines to open primary health centres and community health centres under National Rural Health Mission;

(b) whether under this scheme, with a view to strengthen the health infrastructure at the district, division, block and village levels, buiiding construction, doctors' accommodation construction and making available other medical assistances are also including;

(c) if so, the details thereof;

(d) the number of such centres opened/proposed to be opened, in the Buxar district of Bihar so far under this scheme;

† Original notice of the question was received in Hindi.